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23 JUL 2004 1/3

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PTO/SB/01 (8-96)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration OR
Submitted
with Initial Filing

☐ Declaration
Submitted after
Initial Filing

Attorney Docket Number	SERVIER 427 PCT
First Named Inventor	
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ORODISPERSIBLE PHARMACEUTICAL COMPOSITION OF PERINDOPRIL.

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☐ was filed on (MM/DD/YYYY)

01/22/2003

as United States Application Number or PCT International

Application Number

PCT/FR03/00200

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02.00790	FRANCE	01/23/02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
G. PATRICK SAGE	37,710	MICHELE CUDAHY	55,093

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all corres

Name
Address
Address
City
Country

THE FIRM OF
HUESCHEN AND SAGE
PLLC
ATTORNEYS AND COUNSELORS
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350 EAST MICHIGAN AVENUE
KALAMAZOO, MICHIGAN 49007-3856

ZIP

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name: Patrick Middle Initial: Family Name: WUTHRICH Suffix e.g. Jr.:
Inventor's Signature: *Patrick Wuthrich* Date: June 28, 2004
PATRICK

Residence: City: ORLEANS (France) State: FR Country: FRANCE FRX Citizenship: CH
Post Office Address: 15, rue Marcelin Berthelot
Post Office Address:
City: ORLEANS (France) State: FR Zip: 45000 Country: FRANCE

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name		Hervé				Middle Initial				Family Name		ROLLAND				Suffix e.g. Jr.			
Inventor's Signature												Date		June 28, 2004					
Residence: City		OLIVET (France)				State		FR		Country		FRANCE				Citizenship		FR	
Post Office Address		180, allée des Alisiers																	
Post Office Address																			
City		OLIVET (France)				State		FR		Zip		45160		Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name		Marc				Middle Initial				Family Name		JULIEN				Suffix e.g. Jr.			
Inventor's Signature												Date		June 28, 2004					
Residence: City		SIGLOY (France)				State		FR		Country		FRANCE				Citizenship		FR	
Post Office Address		117, route de Marmain																	
Post Office Address																			
City		SIGLOY (France)				State		FR		Zip		45110		Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.			
Inventor's Signature												Date							
Residence: City						State				Country						Citizenship			
Post Office Address																			
Post Office Address																			
City						State				Zip				Country					
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.			
Inventor's Signature												Date							
Residence: City						State				Country						Citizenship			
Post Office Address																			
Post Office Address																			
City						State				Zip				Country					
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.			
Inventor's Signature												Date							
Residence: City						State				Country						Citizenship			
Post Office Address																			
Post Office Address																			
City						State				Zip				Country					
Additional inventors are being named on supplemental sheet(s) attached hereto																			